This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/502645

Total Fee Calculation

		rotatree	Calculati	on		
	Fee Cade	Total # Claims	Number Extra	X Fee	Fcc	= Total
Basic Filing Fee Total Claims >20 Independent Claims >3 Mult. Dep Claim Present	San./Lg. 201/101 203/103 202/102 204/104	85 -20 - 9 -1 -	65 x	Sm. Entity	Lg. Entiry 18 78	<u>690</u> <u>1170</u> <u>468</u>
Surcharge English Translation	<u>205/105</u>					130
* Fees due upon filing th						
Total Filing Fees Due =	= S	245	18			
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BALANCE DUE ! Office of Initial Patent E	= \$	2458 Ins	5			

Figure 7

FORM OIPE-RAM-01 (Rev. 12/97)

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PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

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Application or Docket Number

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PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999 Application or Docket Number 09, 500, 45, 54, 63, 78, Application or Docket Number										ber				
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<u>:</u>	f the entry in column 1 is less than the entry in column 2, write "0" in column 3. "Il he "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								ÄL		OB	TOTAL		
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FORM **PTO-87** (Rev. 12/99)

Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 **CLAIMS AS FILED - PART I SMALL ENTITY** OTHER THAN (Column 1) (Column 2) TYPE ____ TOTAL CLAIMS SMALL ENTITY OR RATE FEE RATE FOR FEE NUMBER FILED NUMBER EXTRA **BASIC FEE** 370.00 BASIC FEE 740.00 OR TOTAL CHARGEABLE CLAIMS L minus 20= X\$9=X\$18= OR INDEPENDENT CLAIMS - minus 3 = MULTIPLE DEPENDENT CLAIM PRESENT X42 =X84 =OR +140= * If the difference in column 1 is less than zero, enter "0" in column 2 +280= OR TOTAL OR TOTAL **CLAIMS AS AMENDED - PART II** OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY ENTA CLAIMS HIGHEST REMAINING NUMBER ADDI-PRESENT **AFTER** ADDI-**PREVIOUSLY** RATE TIONAL **EXTRA** AMENDMENT RATE TIONAL PAID FOR MENDM FEE FEE Total Minus X\$ 9= X\$18= OR Independent Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X42 =X84= OR +140= +28∂≤ OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER ADDI-**AMENDMENT** PRESENT **AFTER** ADDI-**PREVIOUSLY** RATE TIONAL **EXTRA AMENDMENT** RATE TIONAL PAID FOR FEE FEE Total Minus ** X\$ 9= X\$18= OR Independent Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X42 =X84= OR +140= +280= OR TOTAL OR ADDIT. FEE TOTAL ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS O HIGHEST REMAINING NUMBER **AMENDMENT** ADDI-PRESENT **AFTER** ADDI-**PREVIOUSLY EXTRA** RATE TIONAL **AMENDMENT** RATE TIONAL PAID FOR FEE Total FEE Minus X\$ 9= Independent X\$18= OR Minus *** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X42= X84= OR * If the ntry in column 1 is less than the entry in column 2, write "0" in column 3. +140= +280= OR * If th "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE OR

ADDIT. FEE

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.